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|--|----------------------|------------------------|---------|
| <b>TRANSMITTAL FORM</b><br>AUG 08 2005<br>(to be used for all correspondence after initial filing) | Application Number   | 10/065,856             |         |
|  | Filing Date          | 11/26/2002             |         |
|  | First Named Inventor | Ann E. Loraine         |         |
|  | Art Unit             | 1631                   |         |
|  | Examiner Name        | Marina I. Miller       |         |
| Total Number of Pages in Transmission  | 48                   | Attorney Docket Number | 3291.3A |

## ENCLOSURES (check all that apply)


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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53 | <input checked="" type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>- Return Postcard<br>- Copy of Declaration (4 Pages)<br>- Copy of Extension of Time Request (1 Page) |
| <b>Remarks</b> Replacement Drawings are Formal (17 Pages)<br>Response to Non-Final Office Action and Interview Summary (24 Pages)   |   |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |  |          |        |
|--------------|--|----------|--------|
| Firm         | Affymetrix, Inc.   |          |        |
| Signature    |  |          |        |
| Printed Name | William R. McCarthy III  |          |        |
| Date         | 8/4/2005   | Reg. No. | 55,788 |

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| Signature             |  |      |          |
| Typed or printed name | William R. McCarthy III   | Date | 8/4/2005 |

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